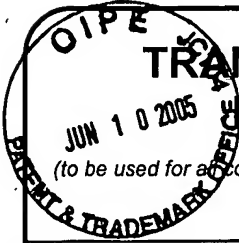


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PTO/SB/21 (08-00) Approved for use through 10/31/2002. OMB 0651-0031

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TRANSMITTAL FORM

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Total Number of Pages in This Submission

15

Application Number

10/730,064

Filing Date

December 9, 2003

First Named Inventor

Zvi OR-BACH *et al.*

Group Art Unit

2826

Examiner Name

Tuan N. Quach

Attorney Docket Number

38897-199163

ENCLOSURES (check all that apply)

☒ Fee Transmittal Form

☒ Fee (charged to 22-0261)

☒ Amendment / Response

☐ After Final

☐ Affidavits/declaration(s)

☐ Extension of Time Request

☐ Express Abandonment Request

☐ Information Disclosure Statement

☐ Certified Copy of Priority Document(s)

☐ Response to Missing Parts/Incomplete Application

☐ Response to Missing Parts under 37 CFR 1.52 or 1.53

☐ Assignment Papers (for an Application)

☐ Drawing(s)

☐ Licensing-related Papers

☐ Petition

☐ Petition to Convert to a Provisional Application

☐ Power of Attorney, Revocation Change of Correspondence Address

☒ Terminal Disclaimer

☐ Request for Refund

☐ CD, Number of CD(s) _____

☐ After Allowance Communication to Group

☐ Appeal Communication to Board of Appeals and Interferences

☐ Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)

☐ Proprietary Information

☐ Status Letter

☒ Statement under 37 CFR 3.73(b)

Remarks

The Amendment includes a petition for one-month extension of time.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name

26694

PATENT TRADEMARK OFFICE

Signature

Jeffrey W. Gluck, Ph.D. - Reg. No. 44,457

Date

June 10, 2005

CERTIFICATE OF MAILING

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DATE RECEIVED JUN 10 2005

FEE TRANSMITTAL

for FY 2005

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) 365.00

Complete if Known

Application Number	10/730,064
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METHOD OF PAYMENT (check one)					FEE CALCULATION (continued)																																																																																																																																																																																																																																		
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number: 22-0261</p> <p>Deposit Account Name: Venable LLP</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>					<p>3. ADDITIONAL FEES</p> <table border="1"> <thead> <tr> <th>Fee Code</th> <th>Lrg Ent Fee (\$)</th> <th>Fee Code</th> <th>Sm Ent Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1111</td><td>500</td><td>2111</td><td>250</td><td>Utility Search Fee</td><td></td></tr> <tr><td>1112</td><td>100</td><td>2112</td><td>50</td><td>Design Search Fee</td><td></td></tr> <tr><td>1113</td><td>300</td><td>2113</td><td>150</td><td>Plant Search Fee</td><td></td></tr> <tr><td>1114</td><td>500</td><td>2114</td><td>250</td><td>Reissue Search Fee</td><td></td></tr> <tr><td>1311</td><td>200</td><td>2311</td><td>100</td><td>Utility Examination Fee</td><td></td></tr> <tr><td>1312</td><td>130</td><td>2312</td><td>65</td><td>Design Examination Fee</td><td></td></tr> <tr><td>1313</td><td>160</td><td>2313</td><td>80</td><td>Plant Examination Fee</td><td></td></tr> <tr><td>1314</td><td>600</td><td>2314</td><td>300</td><td>Reissue Examination Fee</td><td></td></tr> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - 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1201	200	2201	100	Independent claims in excess of 3																																																																																																																																																																																																																																			
1203	360	2204	180	Multiple dependent claim, if not paid																																																																																																																																																																																																																																			
1204	200	2204	100	** Reissue independent claims in excess of three																																																																																																																																																																																																																																			
1205	50	2205	25	** Reissue claims in excess of 20 and over original patent																																																																																																																																																																																																																																			
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**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY Complete (if applicable)			
Name (Print/Type)	Jeffrey W. Gluck, Ph.D.	Reg No. Attorney/Agent)	44,457
Signature		Date	6/10/05
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